

POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

Application Number	09/896,854	
Filing Date	06/29/2001	
First Named Inventor	DEVERILL, Ian J.	i
Title	COMPUTER SYSTEM PERFORM	
Group Art Unit 2163	MONITORING USING TRANSA	CTION
Examiner Name	LATENOT BITTI	
Attorney Docket Number	11252-009	•

I hereby appoint: Practitioners at 0 OR X Practitioner(s) na	Customer Number	□ — • [Place Customer Number Bar Code Label here
X Hodinion (7)	Name	Registration	on Number
John F.	Letchford	33,328	
Steven J	. Gelman	41,034	
·			
business in the United S	agent(s) to prosecute the application ide States Patent and Trademark Office cont	ected therewith.	
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer Number Bar Code Label here OR			
Firm or Individual Name	John F. Letchford		
Address	Klehr, Harrison, Harvey,	Branzburg	& Ellers LLP
Address	260 South Broad Street	State PA	Zip 19102
City		State PA	Zip 19102
Country	US	Fax 215-568	3-6603
Telephone	215-569-3495	Fax 215-568	3-0003
I am the: Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
SIGNATURE of Applicant or Assignee of Record			
Signature 2	E. Hammad Jul 2001		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
	rms are submitted.		



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/896,854	
Filing Date	06/29/2001	1
First Named Inventor	DEVERILL, Ian J.	l
Title	COMPUTER SYSTEM PERFORM	
Group Art Unit 2163	MONITORING USING TRANSA	CTION
Examiner Name	LATENCI DATA	l
Attorney Docket Number	11252-009)

I hereby appoint: Practitioners at OR Practitioner(s) n	Customer Number		Place Customer Number Bar Code Label here	
	Name	Registra	tion Number	
John F.	Letchford	33,328		
	. Gelman	41,034		
<u> </u>				
business in the United	or agent(s) to prosecute the application id States Patent and Trademark Office con	nected therewit	n.	
Please change the corn The above-mention OR Practitioners at Cu	espondence address for the above-ident ned Customer Number.		No: Place Customer Number Bar Code Label here	
Firm or Individual Name	John F. Letchford			
Address	Klehr, Harrison, Harvey	Branzburg	& Ellers LLP	
Address	260 South Broad Street	7.	10102	
City	Philadelphia	State PA	Zip 19102	
Country	US	015 5/	(0.6602	
Telephone	215-569-3495	Fax 215-56	68-6603	
I am the: Applicant/Inven Assignee of rec Statement under	ord of the entire interest. See 37 CFR 3. For 37 CFR 3.73(b) is enclosed. (Form PT	71. O/SB/96).		
	SIGNATURE of Applicant or Assign	ee of Record		
Signature Date	J. Deverible Little 2 July 2001			
NOTE: Signatures of all the inve forms if more than one signatur	entors or assignees of record of the entire interest e is required, see below*.	or their representa	ative(s) are required. Submit multiple	
Total off	orms are submitted.		ands of the individual case. Any comments of	



POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

09/896,854	1
06/29/2001	l
DEVERILL, Ian J.	
	CTION
LATENCI DATA	Ì
11252-009	•
	06/29/2001 DEVERILL, Ian J. COMPUTER SYSTEM PERFORM MONITORING USING TRANSA- LATENCY DATA

I hereby appoint: Practitioners OR Practitioner(s	at Customer Number	Place Customer Number Bar Code Label here		
	Name	Registration Number		
	F. Letchford	33,328		
Steve	n J. Gelman	41,034		
<u></u>		destified above and to transport all		
business in the Unit	s) or agent(s) to prosecute the application id ted States Patent and Trademark Office con	nnected therewith.		
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number OR				
Firm or Individual Name	John F. Letchford	<u> </u>		
Address	Klehr, Harrison, Harvey	, Branzburg & Ellers LLP		
Address	260 South Broad Street	State PA Zip 19102		
City	Philadelphia	State PA Zip 19102		
Country	US	Fax 215-568-6603		
Telephone	215-569-3495	Fax 215-568-6603		
I am the: Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
	SIGNATURE of Applicant or Assign	nee of Record		
Name	Alex D. Hassan			
Signature				
Date 2/5vt7/200 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				
NOTE: Signatures of all the forms if more than one sign	inventors or assignees of record of the entire interest ature is required, see below*.	it or their representative(s) are required. Submit multiple		
Total of4	forms are submitted.			



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/896,854	ì
Filing Date	06/29/2001	
First Named Inventor	DEVERILL, Ian J.	
Title	COMPUTER SYSTEM PERFORM	
Group Art Unit 2163	MONITORING USING TRANSA	CTION
Examiner Name	LATENCY DATA	
Attorney Docket Number	11252-009	,

	-					
I hereby	appoint:			Г		-, I
Practitioners at Customer Number OR					Place Customer Number Bar Code Label here	
X Pra	ctitioner(s) na	med below:				
		Name		Registrati	on Number	
		Letchford		33,328		
	Steven J	. Gelman		1,034		
.			1			(
as my/our business i	attorney(s) or in the United S	agent(s) to prosecute the applicati States Patent and Trademark Office	on identif	ed above, a ed therewith.	nd to transact all	
Please ch	ange the corre	espondence address for the above-	identified	application t	o:	
	above-mentior	ned Customer Number.				
OR		sta an an Niverban	ー		lace Customer umber Bar Code	
OR	itioners at Cus	stomer Number	ل		abel here	
	or					
371	lual Name	John F. Letchford			<u> </u>	
Address		Klehr, Harrison, Harv		anzburg	& Ellers LLP	
Address		260 South Broad Stree		T	1	
City		Philadelphia	State	PA	Zip 191	02
Country		US		215-568	6602	
Telephone		215-569-3495	Fax	213-300	5-0003	
I am the:						ŀ
LX Ap	plicant/Invente	or.				:
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Norse	Mar	ren P. Finnerty				*
Signature Water true of						
Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						
forms if more than one signature is required, see below*.						
Total of	- //	ms are submitted.				